

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

RECEIVED
COPY

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

LINDA K. ESTES

(b) Committee Name:

LOCALS FOR LINDA ESTES

(c) Mailing Address:

P.O. 610

KOLOA, HI 96756

(d) Phone (Bus)

742-2418

(Res)

742-8366

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

☐ 1st Preliminary Primary

☐ Amended

☐ First

☐ Third

☐ 2nd Preliminary Primary

☐ Short Form¹

☐ Second

☐ Fourth

☒ Final Primary

☐ Preliminary General

☐ Final Election Period

☐ Supplemental

REPORTING PERIOD

Sept 9 through Sept 25

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE	
1. Cash on Hand at the Beginning of the Election Period ²		0	1
2. Cash on Hand at the Beginning of this Reporting Period.....	1006.54		2
3. Total Receipts (From Line 15).....	3227.00	9936.00	3
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	4233.54	9936.00	4
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	4146.16	9848.62	5
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	87.38	87.38	6
7. Total Loans at the Closing of this Reporting Period.....			7
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....			8
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....			9
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	87.38		10

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Linda K. Estes 10-1-06 Yvonne Johnson 10/1/06
Candidate Signature Date Treasurer Signature Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.
² Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.
An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	1127.	2886.	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....		2750.	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	1127	5636.	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....			11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	2100	4300	11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	2100	4300	11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	3227	9936	12
13. Public Funds and Other Receipts.....			13
14. Loans.....			14
15. Total Receipts (Add Lines 12 through 14).....	3227	9936	15
DISBURSEMENTS			
16. Expenditures.....	4146.16	9848.62	16
17. Loans Repaid or Forgiven.....			17
18. Unpaid Expenditures Paid or Forgiven.....			18
19. Subtotal Disbursements (Add Lines 16 through 18).....	4146.16	9848.62	19
20. Unpaid Expenditures.....			20
21. Total Disbursements (Add Lines 19 and 20).....	4146.16	9848.62	21

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE

OF

Linda Estes LOANS FOR Linda Estes

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9-25	<input type="checkbox"/> NON-MONETARY CONTRIBUTION CONTRIBUTIONS OF \$100. OR LESS		1127.	2886
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total
the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES

☒ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
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SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 2

Linda Estes - LOCALS FOR Linda Estes

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9-25	<input type="checkbox"/> NON-MONETARY CONTRIBUTION SHERRY ESTES 8201 GOLF COURSE RD NW ALBUQ, N.M. 87120	Sister	250	250
9-25	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Linda Estes P.O. 610 Koloa, HI 96756	Candidate	1850.	3850
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

2100.

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(iii) or 11(b)(iii)).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE

OF

Linda Estes LOCALS FOR Linda Estes

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9-8	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Lihue Post Office Lihue, HI 96766	Postage	1560.-
9-8	<input type="checkbox"/> NON-MONETARY CONTRIBUTION PRINTING SERVICES CORP 3148 OLIMANA ST Lihue, HI 96766	Campaign BANNER	104.11
9-9	<input type="checkbox"/> NON-MONETARY CONTRIBUTION WALMART Lihue, HI 96766	Lei	4.98
9-11	<input type="checkbox"/> NON-MONETARY CONTRIBUTION VOTER CONTACT SERVICES P.O. BOX 25274 HONOLULU, HI 96825	Mailing LABELS	99.97
9-11	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HONOLULU ADVERTISER P.O. BOX 30210 HONOLULU, HI 96820	Campaign Ads	937.44
9-12	<input type="checkbox"/> NON-MONETARY CONTRIBUTION CONTEMPORARY FLAVORS 1610 HALEUKAANA ST Lihue, HI 96766	Food FOR HGEA Reception	1,067.71
9-14	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Koloa Post Office Koloa, HI 96756	Postage	47.40

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....

3821.61

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 2

Linda Estes Locals For Linda Estes

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9-15	<input type="checkbox"/> NON-MONETARY CONTRIBUTION TABA SERVICE 2-2489 KAUMALII HWY KALAHOO, HI	GAS	42.10
9-15	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Lihue Post Office Lihue, HI 96766	Postage	17.16
9-18	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HONOLULU ADVERTISER P.O. BOX 30210 HONOLULU, HI 96820	Campaign Ad	227.33
9-19	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Shell 3-1906 KAUMALII HWY LIHUE, HI 96766	GAS	37.96
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... 324.55

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... 4146.16